

POSITION	INITIALS	IU NO.	DATE
FEE DETERMINATION	T.C2		8/10/99
O.I.P.E. CLASSIFIER			8-13-99
FORMALITY REVIEW	X	71531	8-25-99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	✓ ✓ ✓ ✓ ✓
2	— — —
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6	✓ ✓ ✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

BEST AVAILABLE

(LEFT INSIDE)